

Medicaid's LMRP List (REVISED, changes are underlined) updated 1/25/2006

NOTE: If the LMRP number begins with an A, the policy only applies to hospital outpatient services. A "B" indicates physician services. If both A and B are present, then the policy applies to all type of services billed with this procedure code. Injectables, whether given in an outpatient setting or physician's office are governed by the indicated policy.

On a HCFA 1500, the detail diagnosis code must be on the included list. On an outpatient UB-92, the primary diagnosis code must be on the included list.

Service	Procedure Codes	Effective Date	Medicare's LMRP or Transmittal Number <u>www.almedicare.com</u>	Additions/Deletions
Debridement	11040,11041,11042, 11043,11044,97601, 97602, 97597,97598	5/1/03 approx.	B00-15, A-00-03	Added procedure codes 97597 and 97598
<u>Amifostine</u>	<u>J0207</u>	11/04	B00-27	
Aranesp	J0880	4/1/03 approx.	B02-01 <u>LCD L11914</u>	<u>New diagnosis codes added based on Dec05 and Jan06 Medicare Focus</u>
Immune Globulin Intravenous	J1563, J1564 , J0850, <u>J1656. J1567</u>	4/1/03 approx.	A98-24/ <u>L13075</u> B97-33/ <u>L11961</u>	<u>New diagnosis codes added based on Dec05 and Jan06 Medicare Focus</u>
Peripheal Arterial Studies	93922, 93923, 93924, 93925, 93926, 93930, 93931	4/1/03 approx.	B02-12	
Peripheral Venous Exams	93965, 93970, 93971,	4/1/03 approx.	B02-13	
<u>Polysomnography Sleep Testing</u>	95805, 95806, 95807, 95808, 95810, 95811, 95822	4/1/03 approx.	<u>A99-15/L1062</u>	<u>B99-13 retired</u>
HBO Therapy	99183	Since 1999	AB-02-183	LMRP retired 9/1/2002 and replaced with National Coverage Determination for

				Hyperbaric Oxygen Therapy (35-10)
Intensity Modulated Radiation Therapy	77301, 77418	5/1/03 approx.	A02-07	<u>Medicaid discontinued diagnosis restriction 6/1/05</u>
Sodium Hyaluronate	J7317, J7320	5/1/03 approx.	B98-02	
Rituximab	J9310	5/1/03 approx.	B98-13/ <u>L6718</u> A98-29/ <u>L1007</u>	<u>New diagnosis codes added based on Dec05 and Jan06 Medicare Focus</u>
Deep Brain Stimulation	61855, 61862, 61880, 61885, 61886, 61888, 95970, 95971, 95962, 95961, 95972, 95973	5/1/03 approx.	AB-03-023	Added 95974 LMRP Part A was retired 5/1/03 and LMRP Part B was retired 3/31/03
Gemtuzumab Ozogamicin (Mylotarg) for Injection	J9300	5/1/03 approx.	B01-02	LMRP retired by Medicare 1/1/2005. Medicaid will maintain diagnosis restrictions.
<u>Oxaliplatin/Eloxatin</u>	<u>J9263</u>	<u>1/1/2006</u>	<u>B03-01/L13000</u>	<u>Diagnosis restricted 153.0 – 154.8</u>
Echocardiography	93303, 93304, 93307, 93308, 93312, 93313, 93314, 93315, 93316, 93317, 93318, 93320, 93321, 93325, A9700	5/1/03 approx.	A98-55 B95-02	Added diagnosis codes: 401.0, 401.1, 401.9, 239, 279.11, 393.0, 398.0, 427.0, 446.0, 446.1, 459.2, 710.0, 747.81, 758.0 - 758.9, 759.0 - 759.9, 781.5, 782.5, 282.60, 674.84 Update added from revised LMRP part A

				in December 2003 Medicare Focus
Swallowing Studies	74230, 92511, 92520, 92526, 92610, 92611	8/1/03 approx.	A98-43	Added procedure codes: 92612, 92614, 92616, 92615, 92617 Update added from revised LMRP part A in December 2003 Medicare Focus
MRA of the Head and Neck	70544, 70545, 70546, 70547, 70548, 70549	1/1/04	A99-19 revised	
MRA of the Chest	71555	1/1/04	A00-19, B00-02	
MRA Peripheral Vessels of the Lower Extremities	73725	1/1/04	B00-03	
MRA of the Abdomen	74185	1/1/04	A00-20	
CT Abdomen & Pelvis	72192, 72193, 72194, 74150, 74160, 74170	1/1/04	B00-05/ <u>L6080</u> A98-59/ <u>L1495</u>	<u>New diagnosis codes</u> <u>added based on</u> <u>Dec05 and Jan06</u> <u>Medicare Focus</u>
CT of the Head & Brain	70450, 70460, 70470	1/1/04	A98-45/ <u>L13071</u> B98-23/ <u>L6086</u>	<u>New diagnosis codes</u> <u>added based on</u> <u>Dec05 and Jan06</u> <u>Medicare Focus</u>
CTs	70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70498, 71250, 71260, 71270, 71275, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72191, 73200, 73201, 73202, 73206, 73700, 73701, 73702, 73706, 74175, 75635, 75989,		No LMRP	

	76013, 76070, 76071, 76355, 76360, 76362, 76370, 76375, 76380, 78607			
MRI Temporomandibular joint(s)	70336	1/1/04	No LMRP	PA Required
MRIs	70540, 70542, 70543, 71550, 71551, 71552, 72195, 72196, 72197, 73218, 73219, 73220, 73221, 73222, 73223, 73718, 73719, 73720, 73721, 73722, 73723, 74181, 74182, 74183, 75552, 75553, 75554, 75555, 76093, 76094, 76393, 76394, 76400	1/1/04	No LMRP	
MRI of the Brain	70551, 70552, 70553	1/1/04	A98-58/ <u>L13118</u> B99-01/ <u>L6479</u>	<u>New diagnosis codes added based on Dec05 and Jan06 Medicare Focus</u>
MRI of the Spine	72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158	1/1/04	A98-57/ <u>L1261</u> B00-23/ <u>L6544</u>	<u>New diagnosis codes added based on Dec05 and Jan06 Medicare Focus</u>
PETs	78459, A9526, G0030, G0031, G0032, G0034, G0035, G0036, G0037, G0038, G0039, G0040, G0041, G0042, G0043, G0044, G0045, G0046, G0047, G0125, G0210, G0211, G0212, G0213, G0214, G0215, G0216, G0217, G0218, G0220, G0221, G0222, G0223,	1/1/04	A02-06	<u>Effective April 1, 2005, CMS deleted G-codes for PET scans and cross walked the G codes to CPT codes. Effective with the date of service July 1, 2005, Medicaid will no longer accept G-codes for PET scans. Providers may bill</u>

	G0224, G0225, G0226, G0227, G0228, G0229, G0230, G0231, G0232, G0233, G0234, G0253, G0254, G0296			<u>either the G-code or CPT code up until July 1, 2005. The CPT codes replacing the G codes have an effective date of April 1, 2005. Medicare has retired the PET LCD but Medicaid will continue diagnosis restriction until further notice.</u>
MRA of the Pelvis	72198		B03-06	